24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
Check If Z 24-hour report 48-hour report Mew report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Adcoprint.com	M M / D D / Y Y Y Y
Mailing Address 8412 Sabal Industrial Blvd.	10 19 2012
City State Zip Code	
Tampa FL 33619	1273.30 action ID : SE.88660
Purpose of Expenditure IE-Mack-Signage Category/ Type 004	<u> </u>
Name of Federal Candidate Supported or Opposed by Expenditure:	President
CONNIE MACK Check One	: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburseme 2012	ent For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Date Freedomworks	
Mailing Address 400 N CAPITOL STREET NW SUITE 765	10 19 2012
Amou	unt
City State Zip Code Washington DC 20001	550.00
Trans	action ID : SE.88650
Purpose of Expenditure IE-Flake-Grassroots Organizing Category/ Type 001	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: JEFF FLAKE Check One	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought B69674.27 Disburseme 2012	ent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1823.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7 7
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ryan Hecker [Electronically Filed] Date 10	20 2012
Signature	2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 2 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOMWORKS FOR AMERICA	C C00499020
Check If 24-hour report 48-hour report New report Amends report filed or	1 M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	Date
Freedomworks	M M / D D / Y Y Y Y
Mailing Address 400 N CAPITOL STREET NW SUITE 765	10 19 2012
	amount
City State Zip Code Washington DC 20001	50.00
Tra	ansaction ID : SE.88651
Purpose of Expenditure IE-Flake-Est. Staff & Overhead Category/ Type 001	Sought: House State: AZ Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JEFF FLAKE Check	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought B75562.19 Disburs 2012	ement For: Primary General Other (specify)
	Date
Freedomworks	10 19 2012
Mailing Address 400 N CAPITOL STREET NW SUITE 765	
	Amount
City State Zip Code Washington DC 20001	92.40
Purpose of Expenditure Category/ Office S	ansaction ID : SE.88654 Sought: House State: LA
IE-Landry-Travel 002 Type 002	Senate District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: Check	President One: Support Oppose
JEFFRET WI LANDRY	
Calendar Year-To-Date Per Election for Office Sought 312827.40 Disburs 2012	ement For: Primary General Other (specify)
(a) CURTOTAL of Henrical Independent Funenditures	110.10
(a) SUBTOTAL of Itemized Independent Expenditures	142.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL ladar and art Furanditures	
(c) TOTAL Independent Expenditures	7 7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ryan Hecker [Electronically Filed] Date 10	/ 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	20 2012

Image# 12960630303 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E) PAGE 6 OF FOR SE OF FORM 24/48 NAME OF COMMITTE (In Full) FEC IDENTIFICATION NUMBER ▼ FREEDOMWORKS FOR AMERICA C00499020 Check If 24-hour report New report 48-hour report Amends report filed on Full Name (Last, First, Middle Initial) of Payee Date Freedomworks 10 19 2012 Mailing Address 400 N CAPITOL STREET NW SUITE 765 Amount City State Zip Code 28.00 DC Washington 20001 Transaction ID: SE.88658 State: Office Sought: Purpose of Expenditure House PA Category/ IE-Smith-Est Staff & Overhead 001 Type Senate District: 00 President Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Support TOM SMITH Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 576826.04 2012 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date Freedomworks 10 2012 19 Mailing Address 400 N CAPITOL STREET NW SUITE 765 Amount Zip Code City State 2299.00 DC Washington 20001 Transaction ID: SE.88661 State: Office Sought: Purpose of Expenditure IE-Mack-Est. Staff & Overhead House FL Category/ 001 Type Senate District: 00 President Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Support Oppose CONNIE MACK **General** Disbursement For: Primary Calendar Year-To-Date Per Election 1631348.23 2012 for Office Sought Other (specify)

(b)	SUBTOTAL of Unitemized Independent Expenditures			 7		_	- - -	_		-	
(c)	TOTAL Independent Expenditures	•	_	 7	_	<u>-</u>	-7-	-	-	_	

(a) SUBTOTAL of Itemized Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

D II 1					
Ryan Hecker	[Electronically Filed]				/ Y Y Y Y Y Y
Signature		Date	10	20	2012

2327.00

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

5 C	HEDULE E)		FOR SE OF	OF 6 F FORM 24/48			
	ME OF COMMITTE (In Full)		FEC IDENTIFICAT				
FI	REEDOMWORKS FOR AMERICA		C C00499020				
			0 000493020				
Ch	neck If X 24-hour report 48-hour report New report Amends report		/ D = D /	Y = Y = Y			
٦	Full Name (Last, First, Middle Initial) of Payee	Date					
1	Freedomworks		/ M / D D /	YYYY			
1	Mailing Address 400 N CAPITOL STREET NW SUITE 765	— L	10 19	2012			
1		Amou	nt				
	City State Zip Code			761.03			
1	Washington DC 20001	Transa	ction ID : SE.88662	701.00			
	Purpose of Expenditure Category/ USA Categ	Office Sough	ht: House	State: FL			
	Type 002		Senate	District: 00			
1	Name of Federal Candidate Supported or Opposed by Expenditure:	Check One:	President Support	Oppose			
	CONNIE MACK	Check One:	Support	Oppose			
1	Calendar Year-To-Date Per Election 1632109.26	Disbursemer		G eneral			
1	for Office Sought	Ot	ther (specify)				
	Full Name (Last, First, Middle Initial) of Payee	Date					
1	Page Printing	M		7 Y Y Y Y			
1	Mailing Address 945 Washington Ave.		10 19	2012			
1		Amou	nt				
	City State Zip Code			2075.00			
	Croyden PA 19021		action ID : SE.88655				
1	Purpose of Expenditure Category/ IE-Buerkle-Yard Signs Type 004	Office Sough		State: NY			
	Туре		Senate President	District: 25			
1	Name of Federal Candidate Supported or Opposed by Expenditure: ANN MARIE BUERKLE	Check One:		Oppose			
	ANN MARIE BUERRLE						
1	Calendar Year-To-Date Per Election	Disbursemer 2012		General			
	for Office Sought	Ot	ther (specify)				
	(a) SUBTOTAL of Itemized Independent Expenditures	•		2836.03			
	(b) SUBTOTAL of Unitemized Independent Expenditures	•					
	(c) TOTAL ladar and at Emandian						
	(c) TOTAL Independent Expenditures	•					
١	Under penalty of perjury I certify that the independent expenditures reported herein were r with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.						
	Ryan Hecker [Electronically Filed] Date	M M /		12			
	Signature [Electronically Filea] Date	10	20 20	12			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

3 C	HEDULE E)		FOR SE OF	OF 6 F FORM 24/48			
NΑ	ME OF COMMITTE (In Full)		FEC IDENTIFICATI				
FI	REEDOMWORKS FOR AMERICA						
			C C00499020				
Ch	eck If X 24-hour report 48-hour report New report Amends report		M = M / D = D /	Y T Y T Y T			
П	Full Name (Last, First, Middle Initial) of Payee	Date					
	Page Printing						
	Mailian Addusa		10 19	2012			
	Mailing Address 945 Washington Ave.	A					
ı	City. Chota Zin Coda	Amou	anı				
	City State Zip Code Croyden PA 19021			21264.49			
ı	Dumana of Europaditum		action ID : SE.88656	State: PA			
	Purpose of Expenditure Category/ Type 004	Office Soug	ght: House Senate				
			President	District: 00			
	Name of Federal Candidate Supported or Opposed by Expenditure:	Check One		Oppose			
	TOM SMITH	Officer Office	заррогт	Оррозе			
	Calendar Year-To-Date Per Election	Disburseme	ent For: Primary	General			
	for Office Sought	²⁰¹²	Other (specify)				
ŀ	Full Name (Last, First, Middle Initial) of Payee	Date					
	Texas GOP Store		M M / D D /	Y			
	Mailian Addusas		10 19	2012			
	Mailing Address 404 I-45 South	Amou	ınt				
ŀ	Oth. Chate 7'm Oade	Alliot	unt				
	City State Zip Code Huntsville TX 77340		7	5837.92			
ı	7	Office Sou	action ID : SE.88652 aht: House	Ctoto			
	Purpose of Expenditure Category/ Type 004	Onice ooug	Senate				
ı			President	District: 00			
	Name of Federal Candidate Supported or Opposed by Expenditure: JEFF FLAKE	Check One	: Support	Oppose			
ı	JEFF FLARE		Z salda				
	Calendar Year-To-Date Per Election 875512.19	Disburseme		General			
	for Office Sought	C	Other (specify)				
	(a) SUBTOTAL of Itemized Independent Expenditures			27102.41			
	·		7 7				
	(b) SUBTOTAL of Unitemized Independent Expenditures						
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	(c) TOTAL Independent Expenditures						
		·	7 7				
	Under penalty of perjury I certify that the independent expenditures reported herein were rep						
	with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	either, or (if	tne reporting entity	is not a political			
1	,, p, p,						
	Ryan Hecker	M = M /	D D / Y Y	YY			
	Signature [Electronically Filed] Date	10	20 20	12			
	Orginataro						

Image# 12960630306 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E) PAGE 6 OF FOR SE OF FORM 24/48 NAME OF COMMITTE (In Full) FEC IDENTIFICATION NUMBER ▼ FREEDOMWORKS FOR AMERICA C00499020

Check If X 24-I	nour report 48-hour report	X New	report A	mends repor	rt filed o	on	/ D D /	Y			
Full Name (La Texas G	ast, First, Middle Initial) of Payee OP Store					Date	/ DID /	2012			
Mailing Addre	ss 404 I-45 South					10 Amount	19	2012			
						Amount					
City Huntsville		State TX	Zip Code 77340		Т	ransaction	ID : SE.88653	10617.00			
Purpose of E IE-Landry-Sig			Category/ Type	004		Sought:	House Senate	State: LA District: 03			
	eral Candidate Supported or Oppo	osed by Expendi	ture:		Check	c One:	President Support	Oppose			
JEFFREY M	LANDRY				Officer	C Offic.	Gupport	Оррозс			
Calenda	r Year-To-Date Per Election for Office Sought	5	31273	5.00	Disbui 2012	other (or: Primary (specify)	General			
	ast, First, Middle Initial) of Payee Design & Illustration LLC	;		,		Date	/ D D /	Y			
Mailing Addre	Mailing Address PO Box 4557					10192012					
City		State	Zip Code			Amount		22.42			
Winchester		VA	22604		_		- ID - OF 6005	23.13			
Purpose of E	xpenditure		Category/			Sought:	n ID : SE.88657 House	State: PA			
IE-Smith-Des	iġn Services		Type	004		-	Senate President	District: 00			
	eral Candidate Supported or Oppo	osed by Expendi	ture:		Check	c One:	Support	Oppose			
TOM SMITH					Check One: Support Oppose						
Calend	ar Year-To-Date Per Election for Office Sought		57679	8.04	Disbui 2012	Other	or: Primary (specify)	General			
(a) SUBTOTA	L of Itemized Independent Expend	litures			. •		7 7	10640.13			
(b) SUBTOTA	L of Unitemized Independent Expe	enditures			•						
(c) TOTAL Inc	lependent Expenditures				•		7 7	44871.27			
with, or at the	of perjury I certify that the indeprequest or suggestion of, any care) any political party committee or	ididate or author									
	yan Hecker	[Elect	tronically Filed	Date	M = 10	M / D		2			
Signature			_								
						FFC Cah	adula E /Farma C	24/48) Pay 07/201			